

We claim:

1. A method of treating heart failure and/or renal failure in a patient, comprising administering CGRP to said patient at a rate between about 50 and 500 ng/min for a time between 30 minutes and 8 hours per day as needed to provide symptomatic relief, prevent exacerbation of symptoms, and/or prevent and/or delay progression of the disease state of heart failure in said patient.
2. The method of claim 1, wherein said CGRP is administered parenterally, orally, sublingually, intranasally, intracoronary, intra-arterially, intravenously, transmucosally, or intradermally.
3. The method of claim 1, wherein said CGRP is administered via a constant rate pump, a variable rate pump, a programmable pump, or an osmotic pump.
4. The method of claim 1, wherein said CGRP is administered transdermally.
5. The method of claim 4, wherein said transdermal administration is accomplished with a transdermal delivery device, a cream, an ointment, a patch or a bandage.
6. The method of claim 4, wherein said CGRP is combined with a penetration enhancer.
7. The method of claim 6, wherein said penetration enhancer is selected from the group consisting of propylene glycol, polyethylene glycol, isopropanol, oleyl alcohol, ethoxydiglycol, sodium xylene sulfonate, ethanol, oleic acid, N-methylpyrrolidone, laurocapram, alkanecarboxylic acids, dimethylsulfoxide, polar lipids, and N-methyl-2-pyrrolidone.
8. The method of claim 6, wherein said penetration enhancer is oleic acid, oleyl alcohol or a long-chain fatty acid.
9. The method of claim 1, wherein said CGRP is combined with one or more agents selected from the group consisting of alcohols, moisturizers, humectants, oils, emulsifiers, thickeners, thinners, surface active agents, fragrances, preservatives, antioxidants, vitamins, and minerals.
10. The method of claim 1, further comprising administering at least one drug selected from the group consisting of anti-proliferative agents, anti-clotting agents, vasodilators, diuretics, beta-blockers, calcium ion channel blockers, blood thinners, cardiotonics, ACE inhibitors, anti-inflammatories, and antioxidants.
11. The method of claim 10, wherein said CGRP and said at least one drug are administered as an admixture, separately and simultaneously, or separately in any order.

12. The method of claim 1, wherein the length of said treatment is sufficient to improve renal blood flow, glomerular filtration rates, and/or serum levels of urea and creatinine in said patient.
13. The method of claim 1, wherein said treatment is administered to said patient in a hospital for the duration of the time said patient is in the hospital.
14. The method of claim 1, wherein said treatment is administered to a patient on an outpatient basis.
15. The method of claim 1, wherein said patient is a pediatric patient.
16. The method of claim 1, wherein said treatment is followed by maintenance therapy comprising administration of CGRP a rate between 0.8 to 10 ng/kg/min as needed to relieve or prevent exacerbation of symptoms, or prevent or delay progression of said heart failure.
17. A method of treating heart failure in a patient, comprising administering CGRP to said patient at a rate between about 500 and 600 ng/min for up to 8 hours per day for at least three consecutive days or several times per week as needed to provide symptomatic relief, prevent exacerbation of symptoms, and/or prevent and/or delay progression of the disease state of heart failure in said patient.
18. The method of claim 17, wherein said treatment is provided as outpatient therapy, in an emergency room, or in an intensive care unit.
19. The method of claim 17, wherein said treatment further improves the quality of life of said patient.
20. A method of treating heart failure and/or renal failure in a patient, comprising administering CGRP to a heart failure patient as an initial or maintenance therapy at a rate between 0.8 to 10 ng/kg/min two or more times per day as needed to provide symptomatic relief, prevent exacerbation of symptoms, and/or prevent and/or delay progression of the disease state of heart failure in said patient.
21. A method of preventing or reducing the risk of occurrence of myocardial infarction, comprising administering to a human at risk of having a myocardial infarction a CGRP formulation in an amount effective to prevent or reduce the risk of said myocardial infarction.
22. A method of counteracting ischemia in a patient, wherein said ischemia is due to a myocardial infarction, said method comprising administering CGRP to said patient as an initial or maintenance therapy, alone or in conjunction with other interventional therapies, at a rate between 0.8 to 16 ng/kg/min for up to 24 hours per day as needed

to provide cardioprotection, reduction in infarction size, reduction in reperfusion injury, symptomatic relief, and/or prevent exacerbation of symptoms.